



PATENT
ATTORNEY DOCKET NO.: 030793-052100

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
Ronald W. MINK et al.) Group Art Unit: 1723
)
Application No.: 09/973,956) Examiner: D. SORKIN
)
Filed: October 11, 2001)
)
For: DEVICE FOR COLLECTION AND)
ASSAY OF ORAL FLUIDS)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

REQUEST FOR CORRECTION OF INVENTORSHIP
UNDER 37 C.F.R. 1.48

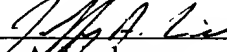
It is requested that the inventorship of the above identified application be corrected to add:

Robert C. BOHANNON
401 Silver Creek Trail
Chapel Hill, NC 27514

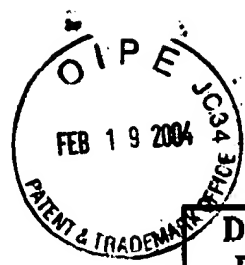
Pursuant to the requirements of 37 C.F.R. 1.48(a), applicants are submitting a newly executed Declaration and a LETTER from Mr. Robert C. Bohannon stating that the error in his omission as an inventor of the subject matter of at least one claim of the instant application occurred without deceptive intent on his part. Further attached is a CONSENT OF THE ASSIGNEE, OraSure Technologies, Inc., to the addition of Mr. Robert C. Bohannon as a co-inventor of the above identified application.

Enclosed is the \$130.00 processing fee required under 37 C.F.R. 1.17(i).

Respectfully submitted,

By: 
Jeffrey A. Lindeman
Registration No. 34,658

Customer No. 22204
NIXON PEABODY LLP
401 9th Street, N.W.
Washington, DC 20004
Telephone: 202-585-8350



**DECLARATION FOR UTILITY OR
DESIGN PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(c)) required)

Attorney Docket Number	030793-052100
First Named Inventor	Ronald W. MINK
COMPLETE IF KNOWN	
Application Number	09/973,956
Filing Date	October 11, 2001
Art Unit	1723
Examiner Name	David L. SORKIN

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE FOR COLLECTION AND ASSAY OF ORAL FLUIDS

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

10/11/2001

as United States Application Number or PCT International

Application Number

09/973,956

and was amended on (MM/DD/YYYY)

06/24/2002,
02/27/2003,
08/25/2003, and
10/27/2003

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application..

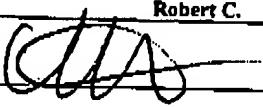
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label				22204		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
City				State		ZIP	
Country			Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Ronald W.				MINK			
Inventor's Signature						Date	
Residence: City West Linn			State: Oregon		Country: USA		Citizenship: United States
Mailing Address: 19886 Bellevue Way							
City: West Linn			State: Oregon		ZIP: 97068		Country: USA
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Andrew S.				GOLDSTEIN			
Inventor's Signature						Date	
Residence: City			State: Oregon		Country: USA		Citizenship: United States
Mailing Address: 7260 SW Ascot Court							
City: Portland			State: Oregon		ZIP: 97225		Country: USA
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Robert C.		BOHANNON	
Inventor's Signature 		Date 2/19/04	
Residence: City: Chapel Hill	State: North Carolina	Country: USA	Citizenship: United States
Mailing Address: 401 Silver Creek Trail			
Mailing Address:			
City: Chapel Hill	State: North Carolina	ZIP: 27514	Country: USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			
City:	State:	ZIP:	Country:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			
City:	State:	ZIP:	Country:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			
City:	State:	ZIP:	Country:

